



Attachment A

City of Atascadero Volunteer Application

City of Atascadero
 6500 Palma Avenue
 Atascadero, CA 93422
 (805) 461-5000

CONTACT INFORMATION			
Name (Last)		Name (First)	
Address		City	
Phone Number		State	
E-Mail Address		Zip	
Occupation (If retired, list former occupation)		Driver's License #	
Date of Birth		DL Expiration Date:	
<p>Please list any special training, including educational background, which may be utilized during your time as a volunteer.</p>			
<p>Please explain any prior volunteer experience, and why you are considering volunteering for the City of Atascadero.</p>			
VOLUNTEER PREFERENCES: Check all that applies to indicate your preference			
<p>General Interests</p> <p><input type="checkbox"/> Work Behind the Scenes</p> <p><input type="checkbox"/> Work with Children</p> <p><input type="checkbox"/> Work with Seniors</p> <p><input type="checkbox"/> Manual Labor</p> <p><input type="checkbox"/> Clerical Support</p> <p><input type="checkbox"/> Fire Department</p> <p><input type="checkbox"/> Planning Department</p> <p><input type="checkbox"/> General City Hall Support</p> <p><input type="checkbox"/> Community Services (See Below for More Detail)</p> <p><input type="checkbox"/> Police Department (See Below for More Detail)</p> <p><input type="checkbox"/> Other: (Explain)</p>		<p>Availability</p> <p>Days Available (circle): M TU W TH F SA SUN</p> <p>Times Available: _____ (am/pm) to _____ am/pm</p> <p>Additional constraints on your schedule that may affect your volunteer hours:</p> <p>Do you have limitations related to health or physical ability? If so, please explain.</p>	
<p>Recreation</p> <p><input type="checkbox"/> Youth Sports</p> <p><input type="checkbox"/> (must complete p. 2 Coaches portion)</p> <p><input type="checkbox"/> Zoo Volunteer/Docent</p> <p><input type="checkbox"/> Special Events</p> <p><input type="checkbox"/> Other: (Explain)</p>		<p>Police Department</p> <p><input type="checkbox"/> Clerical Support</p> <p><input type="checkbox"/> Reception Services for Walk-In Customers at PD</p> <p><input type="checkbox"/> Drive Sensitive Reports to Required Agencies</p> <p><input type="checkbox"/> Coordination of Vehicle Fleet Maintenance</p> <p><input type="checkbox"/> Safety and Traffic Patrol Support</p> <p><input type="checkbox"/> Other: (Explain)</p>	



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Youth Coach Volunteers Only

Circle Preference: Head Coach Assistant Coach Either

Name of a child you will be coaching:

Prior Coaching Experience:

Date: League: Duties:

Date: League: Duties:

All Volunteers

Have you been fingerprinted with the City of Atascadero YES / NO If so, when?

ALL VOLUNTEERS ARE REQUIRED TO HAVE LIVESCAN FINGERPRINT/BACKGROUND CHECK.

If you have been convicted of a felony you will not be allowed to volunteer with the City of Atascadero

Working with Minors: Public Resources Code Section 5164 prohibits a City from hiring an employee or utilizing a volunteer in a position which has disciplinary or supervisory authority over a minor, if that person has been found guilty of certain offenses as defined in PRC 5164. The City of Atascadero is required to inquire as to whether you have been found guilty of any of the crimes referenced in PRC 5164. By signing below you are certifying that you HAVE NOT been found guilty of any of these crimes. The full context of PRC 5164 is available in the Volunteer Packet.

My signature certifies that all information on this application is true and correct. If I am selected to be a volunteer for the City of Atascadero, I hereby agree to a Livescan fingerprint background check. I further understand and agree that no compensation or benefits are available for volunteer staff. I am, however, covered under the City's Workers Compensation Resolution and coverage, should the need arise. In addition, my signature below hereby authorizes the City of Atascadero to photograph me during the course of my volunteer service, and to utilize and publish such photographs for City related promotional or other purposes, at the City's sole discretion and without further consideration.

Volunteer's Signature: Date:

If under 18, Parent's Signature: Date:

Volunteer Application Agreement

I certify the above information is true and correct. I agree to a background check if it is determined that my assignment is sensitive enough to require one. I agree that any misstatement or omission of materials or facts is grounds for removal. By signing this, I agree to participate in any orientation and training as required by my assignment.

Signature of Volunteer/Parent or Guardian if application is a minor Date